



State of New Hampshire 2005 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2005

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 04/29/2005
Business ID: 162916
William M. Gardner
Secretary of State

P&D MACHINE, INC.

PO BOX 607

SALEM, NH 03079

ADDRESS OF PRINCIPAL OFFICE:

PO BOX 607

SALEM, NH 03079

REGISTERED AGENT AND OFFICE:

COLLEEN LYONS

1000 ELM STREET P.O. BOX 3701

MANCHESTER, NH 03105

ENTITY TYPE: CORPORATION

BUSINESS ID: 162916

STATE OF DOMICILE: NEW HAMPSHIRE

FEDERAL ID: 020452411

MACHINE SHOP & RELATED SERVICES

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME

PHILIPPE LACHANCE

STREET

19 HICKORY AVE

CITY/STATE/ZIP

SALEM, NH 03079

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME

PHILIPPE LACHANCE

STREET

19 HICKORY AVE

CITY/STATE/ZIP

SALEM, NH 03079

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Philippe Lachance

Please print name and title of signer:

PHILIPPE LACHANCE

1 PRESIDENT

NAME

TITLE

FEE DUE: \$125.00

E-MAIL ADDRESS (OPTIONAL):

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE

MAKE CHECK PAYABLE

RETURN COMPLETE

New Hampshire Department of State, Ann

State of New Hampshire
Fee - Form 47 - (Corporations) 1 Page(s)



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